

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER ONE AMENDMENT		AFTER TWO AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5						
6						
7	1					
8	1					
9		1				
10	1					
11	1					
12						
13						
14						
15						
16						
17						
18		1				
19	1					
20	1					
21		1				
22	1					
23						
24						
25						
26						
27						
28	1					
29						
30						
31						
32						
33		1				
34		1				
35		1				
36						
37						
38						
39						
40						
41	1					
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	13					
TOTAL DEP.	32					
TOTAL CLAIMS	45					

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS
